

Lawyers Professional Liability Insurance Premium Estimate

This form is for estimate purposes only.

Applicant Firm Information

Firm Name		Contact Person	
Address			
City	State	Zip Code	County
Phone Number	Fax Number	E-mail Address	

Attorney Survey Relation to Firm Codes: (OC) Of Counsel (P) Partner (S) Solo (E) Employed Attorney (IC) Independent Contractor				
Attorney Name	Year Admitted to Bar	Year Joined Firm	Relation to Firm (Use above codes)	% Time Working for Firm (OC only)

(Attach separate sheet if necessary for additional attorneys)

Firm Survey	
Number of attorneys in firm	
Number of support staff	
Number of claims/incidents filed against firm during the past 5 years	
Filed: Pending: Total Paid: Total Reserved:	
Firm knowledge of any circumstance(s) or acts(s) which may give rise to a claim.	<input type="checkbox"/> Yes <input type="checkbox"/> No
Number of CLE hours averaged by each attorney during the past 12 months.	
Number of docket control systems. Are they computerized?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Has any attorney with the firm ever been disciplined or denied the right to practice?	<input type="checkbox"/> Yes <input type="checkbox"/> No

Current Coverage	
Current carrier	
Policy expiration date	
Annual premium	
Current Deductible	
Desired Deductible	
Retroactive or prior acts date	
Current limits	
Desired limits	

Practice Survey	
Indicate the percentage of firm income derived from each of the areas of practice listed below. Total must = 100%. (Attach separate sheet if necessary)	
	%
	%
	%
	%
	%

Areas of Practice: Administrative Law, Admiralty Law, Antitrust/Trade, Civil Rights & Discrimination, Collection/Bankruptcy, Construction Law, Consumer Law, Corporate & Business Transactions, Criminal, Employment Law: Defense, Employment Law: Plaintiff, Entertainment/Sports, Environmental Law, Estate/Probate/Trust, Family Law, Financial Institution, Financial Planning, Government Contracts/Relations, Healthcare, Immigration & Naturalization, Insurance, Intellectual Property: Patent/Trademark, Intellectual Property: Copyright, International Law, Labor: Management Representation, Labor: Labor Representation, Commercial & Business Litigation: Defense, Commercial & Business Litigation: Plaintiff, Mediation/Arbitration, Mergers & Acquisitions, Natural Resources, Pension & Employee Benefits, Personal Injury & Negligence: Defense, Personal Injury & Negligence: Plaintiff, Plaintiff: Class Action, Plaintiff: Mass Tort, Real Estate: Residential, Real Estate: Commercial, Securities Law (including bonds, private placements & limited partnerships), Taxation: Opinions, Taxation: Other, Workers Compensation: Defense, Workers Compensation: Plaintiff, Other

To receive Rapid Rate premium estimate, please complete and return this request to:
Insurance Specialists, Inc. — Professional Liability Dept.
P. O. Box 588 - Beaufort, SC 29901
(888) ISI-1959 Fax: (866) 871-2170 866-336-9449
E-mail: SalesDirect@isi1959.com sales@isidirect.com

Please attach a copy of firm letterhead and a copy of policy declarations page (if available). Coverage may be bound only upon submission and acceptance of a fully completed application.

Insurance Specialists, Inc.

02/2025

Agent

Date of Completion